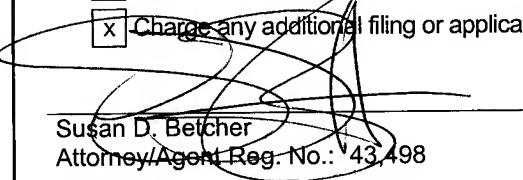


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|---|----------------------------------|--------------------------------|-----------------------------|---------------------------|------------------|
| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 341148018US | |
| Application No. 10/749,478-Conf. #3939 | Filing Date December 31, 2003 | | Examiner J. M. Kish | | Art Unit 3737 |
| Applicant(s): Wright et al. | | | | | |
| Invention: RECEIVER USED IN MARKER LOCALIZATION SENSING SYSTEM | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| Total Claims | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 7 | - 20 = | 0 | x 26.00 | 0.00 |
| Independent Claims | 4 | - 7 = | 0 | x 110.00 | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): Extension for response within third month 555.00 | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 555.00 | | | | | |
| <input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity | | | | | |
| <input type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. 50-0665 in the amount of \$ _____. | | | | | |
| <input checked="" type="checkbox"/> Payment in the amount of \$ 555.00 is submitted via EFT. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 50-0665 as described below. A duplicate copy of this sheet is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
| Dated: August 11, 2011 | | | | | |
|  Susan D. Betcher Attorney/Agent Reg. No.: 43,498 | | | | | |
| PERKINS COIE LLP P.O. Box 1247 Seattle, Washington 98111-1247 (206) 359-8000 | | | | | |